								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									09/	9:	3/130	00	
 		CLAIMS		S FILED - PART I (Column 1) (Column 2)				SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS								RATE	FEE	٦	RATE	FEE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		SIC FE		OR		 	
TOTAL CHARGEABLE CLAIMS			n	minus 20=		*		(\$ 9=		700	\	770.00	
INDEPENDENT CLAIMS			,	minus 3 =		*		X43=		OR	V00	1	
М	ULTIPLE DEPI	ENDENT CLAIM	PRESENT	RESENT						OR			
*	f the differenc	ce in column 1 is	s less than :	ess than zero, enter "0" in columr			L.,	145=	 	OR	<u> </u>		
٠.				ENDED - PART II /0-24-				OTAL	L	OR			
	`	(Column 1)	AMENDE	(Column 2) (Column 3)			UZ	MALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	1.5	Minus	#20		=	XS	9=		OR	X\$18=		
	Independent	TNITATION OF M	Minus	*** ~	<i>l</i>	=	X	43=		OR	X86=		
-	FINST PRES	ENTATIÓN OF M	IULTIPLE DE	PENDENT	CLAIM		+1	45=		OR	+290=		
								OTAL		ا ^{ا ا} ا	TOTAL		
_	(Column 1) (Column 2) (Column 3)							r. FEE	<u> </u>	, ,	ADDIT. FEE	<u></u>	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	* NTATION OF ML	Minus	***	N A 14 4	=	X4	3=	°a.	OR	X86=	-	
	THO THESE	WATON OF MC	JUITE DE	-ENDENT C	LAIM		+14	5=		OR	+290=		
							TO ADDIT.	OTAL		L OB	TOTAL DDIT. FEE		
	· · · · · · · · · · · · · · · · · · ·	(Column 1)		(Column	12)	(Column 3)	ADDII.	rcc Ma	•		DOM. FEEL		
		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA	RAT		ADDI- FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	##		=	X\$ 9	9=		OR	X\$18=		
	ndependent		Minus	***		=	X43	_			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
If the entry in column 1 is less than the entry in column 2 write "0" in column 3									OR	+290=			
* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE													
Tł	ie "Highest Numb	per Previously Paid	For* (Total or	Independent)	is the h	nighest number f	ound in th	e appro	opriate box	in colur	nn 1.		